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APR 2 8 2004

## REQUEST FOR WITHOUT AS ATTORNEY OR A

Application Number	09/226,088		
Filing Date	January 5, 1999		
First Named Inventor	MONTGOMERY, Donald David		
Group Art Unit	2815		
Examiner Name	RICHARDS, N.		
Attorney Docket Number	01665.0004.00US01		

To: Assistant Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313

I hereby apply to withdraw as attorney or agent for the above-identified patent application.

The reason for this request is: In-house counsel will handle further prosecution.

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City	Mukilteo	State	WA		ZIP	98275		
Country	USA							
Telephone	425-493-2000	Fax	425-493-2010					
<ul> <li>☐ This request is made on behalf of myself and</li> <li>☐ all the attorneys/agents of record,</li> <li>☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or</li> <li>☐ the attorneys/agents associated with Customer Number</li> <li>☐ This request is enclosed in triplicate (including any attachments).</li> </ul>								
Name	Albert P. Halluin / Adam K. Whitip	g		•				
Signature allert 1. Haller								
Date	April 2 <b>8</b> , 2004							

NOTE: Withdrawal is effective when approved rather than when received.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.